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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	William First name Charles Middle name Shaffer Last name and Suffix (Sr., Jr., II, III)	Virginia First name Lynn Middle name Shaffer Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7357	xxx-xx-0134

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Debtor 1 William Charles Shaffer
Debtor 2 Virginia Lynn Shaffer

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	565 Eagles Nest Circle	If Debtor 2 lives at a different address:			
		Carrollton, GA 30116 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Carroll				
		County	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Document Page 3 of 52 William Charles Shaffer Debtor 1 Debtor 2 Virginia Lynn Shaffer Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

Go to line 12.

No. Go to line 12.

this bankruptcy petition.

No.

☐ Yes.

11. Do you rent your

residence?

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	tor 1 William Charles Sl tor 2 Virginia Lynn Sha		Docum	Case number (if known)			
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code			
	it to this petition.			ox to describe your business:			
			_	ness (as defined in 11 U.S.C. § 101(27A))			
			_	I Estate (as defined in 11 U.S.C. § 101(51B))			
				defined in 11 U.S.C. § 101(53A))			
				er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the abov	е			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appro deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proc in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing under Cha	pter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is	■ No.					
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety?						
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?				
	g 5 op a 3 .			Number, Street, City, State & Zip Code			

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Debtor 1 William Charles Shaffer

Debtor 2 Virginia Lynn Shaffer Case number (if known)

Part 5: Explain Your

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-12387-whd Doc 1 Filed 11/14/18 Entered 11/14/18 11:53:00 Desc Main Document Page 6 of 52

William Charles Shaffer Debtor 1 Debtor 2 Virginia Lynn Shaffer Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts ☐ No. I am not filing under Chapter 7. Go to line 18. 17. Are you filing under Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for □ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you □ 5001-10.000 **50.001-100.000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ William Charles Shaffer /s/ Virginia Lynn Shaffer William Charles Shaffer Virginia Lynn Shaffer Signature of Debtor 1 Signature of Debtor 2 Executed on November 14, 2018 Executed on November 14, 2018 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Debtor 2	William Charles Si Virginia Lynn Sha	haffer	ιτ Ρ	age 7 of 52	Case number (if known)		
For your	attorney, if you are	I, the attorney for the debtor(s) named in	this petit	ion, declare that Li	nave informed the debtor	(s) about eligibility to proceed	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John T. Dufour	Date	November 14, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
John T. Dufour		
Printed name		
Van Pelt & Dufour Law Firm		
Firm name		
527 Newnan Street		
Carrollton, GA 30117		
Number, Street, City, State & ZIP Code		
Contact phone 770-832-0295	Email address	jdufour@goodattorneys.com
232140 GA		
Bar number & State		

Filli	in this infor	mation to identify your	case:							
Deb	tor 1	William Charles	Shaffer							
		First Name		ddle Name	L	ast Name				
Deb		Virginia Lynn Sh								
(Spou	use if, filing)	First Name	Mic	ddle Name	L	ast Name				
Unite	ed States Ba	ankruptcy Court for the:	NORTH	HERN DISTRICT	OF GEOF	RGIA				
Case	e number									
(if kno	own)								heck if this is an	
								а	mended filing	
Off	icial Fo	rm 107								
		of Financial	Δffairs	for Indivi	duals	Filing for I	Bankruptcy			4/16
										-7,10
		and accurate as possi nore space is needed,								
		n). Answer every ques				,	,	, ,		
Part	Give I	Details About Your Ma	rital Statu	s and Where Vo	u Lived B	Refore				
I all	GIVE	Details About Tour Ma	iiitai Statu	s and where To	u Liveu L	ieioi e				
1.	What is yοι	ır current marital statu	ıs?							
	Mannia	1								
	■ Married ■ Not ma									
	□ NOUTHA	irried								
2.	During the	last 3 years, have you	lived anyv	here other than	where y	ou live now?				
	■ Na									
	■ No □ Yes.Li	st all of the places you li	ived in the	last 2 years. Do r	ot include	whore you live no	2047			
	□ 165. LI	st all of the places you if	ived iii tile	last 5 years. Do n	iot iriciuut	e where you live ho	Jvv.			
	Debtor 1 P	rior Address:		Dates Debtor 1	l	Debtor 2 Prior A	Address:		Dates Debtor 2	2
				lived there					lived there	
		ast 8 years, did you ev								perty
state	s and territo	ries include Arizona, Ca	lifornia, Ida	ho, Louisiana, Ne	evada, Ne	w Mexico, Puerto	Rico, Texas, Washin	gton and W	/isconsin.)	
	■ No									
	_	ake sure you fill out <i>Sch</i>	nedule H: Y	our Codebtors (C	Official Fo	m 106H)				
		and date you mil out our	iodalo I I. I	our codebiors (c)	111 10011).				
Part	2 Expla	in the Sources of You	r Income							
		/e any income from en al amount of income yo						rious caler	ndar years?	
		ng a joint case and you								
	-									
	□ No									
	Yes. Fi	ll in the details.								
			Debtor 1				Debtor 2			
			Sources	of income	Gros	s income	Sources of inco	me	Gross income	
			Check all	that apply.		re deductions and	Check all that ap	ply.	(before deducti	
					exclu	sions)			and exclusions)
	last calenda		☐ Wages	s, commissions,		\$0.00	■ Wages, comm	nissions.	\$7,64	5.00
(Jan	uary 1 to D	ecember 31, 2017)	bonuses,				bonuses, tips	,		
			☐ Opera	ting a business			☐ Operating a b	usiness		
			•				— Operating a b			

Official Form 107

		ginia Lynn Shaffer		Case	e number (if known)	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		lar year before that: December 31, 2016)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions bonuses, tips	\$17,150.00
			☐ Operating a business		☐ Operating a business	s
5.	Include includ	ome regardless of who public benefit payment f you are filing a joint c	me during this year or the two ether that income is taxable. Ex s; pensions; rental income; inte ase and you have income that come from each source separa	amples of other income are a rest; dividends; money collec you received together, list it o	ted from lawsuits; royalties only once under Debtor 1.	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
		1 of current year unt led for bankruptcy:	il SS & Pension	\$29,250.00		
	last calend	dar year: December 31, 2017)	SS & Pension	\$35,100.00		
		lar year before that: December 31, 2016)	SS & Pension	\$35,100.00		
Par	t 3: List	Certain Payments Yo	ou Made Before You Filed for	Bankruptcy		
6.	Are either ☐ No.	Neither Debtor 1 no	2's debts primarily consumer Debtor 2 has primarily constra personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U.S.C. §	§ 101(8) as "incurred by an
		During the 90 days be	efore you filed for bankruptcy, d	id you pay any creditor a total	I of \$6,425* or more?	
		□ No. Go to line		, , ,	, ,	
		_	v each creditor to whom you pa	id a total of \$6,425* or more i	n one or more payments a	and the total amount you
		not includ	creditor. Do not include payme de payments to an attorney for t ent on 4/01/19 and every 3 year	his bankruptcy case.		•
	■ Voc				,	
	– 165.		or both have primarily consule fore you filed for bankruptcy, d		I of \$600 or more?	
		■ No. Go to line	? 7.			
		include p	veach creditor to whom you pa ayments for domestic support of for this bankruptcy case.			
	Creditor's	Name and Address	Dates of payme	ent Total amount	Amount you Was the still owe	his payment for

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De	btor 2	Virginia Lynn Shaffer		Cas	se number (if knowr)	
7.	<i>Inside</i> of wh	in 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in siness you operate as a sole proprietor. 1 any.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which y g securities; and	ou are a genera any managing a	I partner; corporations gent, including one for
	_	No Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	insid	in 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos		ments or transfer a	any property on	account of a de	ebt that benefited an
		No Yes. List all payments to an insider					
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Pa	rt 4:	Identify Legal Actions, Repossession	ns, and Foreclosures	pulu		molado orda	nor o riamo
9.	List a	in 1 year before you filed for bankruptoull such matters, including personal injury fications, and contract disputes.	cy, were you a party in a				
		No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of the	e case
10.		in 1 year before you filed for bankrupt k all that apply and fill in the details below		erty repossessed, f	oreclosed, garn	ished, attached	, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.					
	Cred	ditor Name and Address	Describe the Property		Date)	Value of the property
			Explain what happene				
11.	acco	in 90 days before you filed for bankrup unts or refuse to make a payment bec No		luding a bank or fil	nancial institutio	n, set off any a	mounts from your
		Yes. Fill in the details.					
	Cred	ditor Name and Address	Describe the action the	e creditor took	Date take	e action was en	Amount
12.		in 1 year before you filed for bankrupt t-appointed receiver, a custodian, or a		erty in the possess	ion of an assign	ee for the bene	fit of creditors, a
	_	No Yes					
Pa	rt 5:	List Certain Gifts and Contributions					
		in 2 years before you filed for bankrup	stay did you give any gift	e with a total value	of more than \$6	00 per person?	
13.	_	No	icy, did you give any girt	.s with a total value	of more than so	oo per person:	
		Yes. Fill in the details for each gift.					
		s with a total value of more than \$600 person	Describe the gifts			es you gave gifts	Value
		son to Whom You Gave the Gift and ress:					

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Debtor 1 William Charles Shaffer

Deb	otor 2 Virginia Lynn Shaffer		Cá	ase number (if known)						
14.	Within 2 years before you filed for bankr	ruptcy, o	lid you give any gifts or contributions	s with a total	I value of more than	\$600 to any charity?					
	No										
	Yes. Fill in the details for each gift or c	contribut	on.								
	Gifts or contributions to charities that	total	Describe what you contributed		Dates you	Value					
	more than \$600 Charity's Name				contributed						
	Address (Number, Street, City, State and ZIP Code	e)									
Dos											
Par	t 6: List Certain Losses										
15.	Within 1 year before you filed for bankru	ptcy or	since you filed for bankruptcy, did yo	ou lose anytl	hing because of thef	t, fire, other disaster,					
	or gambling?										
	■ No										
	Yes. Fill in the details.										
	Describe the property you lost and	Descri	be any insurance coverage for the los	22	Date of your	Value of property					
	how the loss occurred				loss	lost					
			the amount that insurance has paid. Lisnice claims on line 33 of <i>Schedule A/B: F</i>								
				, ,							
Par	t 7: List Certain Payments or Transfers	S									
16.	Within 1 year before you filed for bankru	ıptcy, di	d you or anyone else acting on your l	behalf pay o	r transfer any prope	rty to anyone you					
	consulted about seeking bankruptcy or	preparii	ng a bankruptcy petition?			, , ,					
	Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.										
	■ No										
	■ No □ Yes. Fill in the details.										
		Data naumant	Amount of								
	Person Who Was Paid Address		Description and value of any prope transferred	rty	Date payment or transfer was	Amount of payment					
	Email or website address				made	p.,					
	Person Who Made the Payment, if Not Y	í ou									
17.	Within 1 year before you filed for bankru	ıptcy, di	d you or anyone else acting on your l	behalf pay o	r transfer any prope	rty to anyone who					
	promised to help you deal with your cree			?							
	Do not include any payment or transfer that	t you list	ed on line 16.								
	■ No										
	Yes. Fill in the details.										
	Person Who Was Paid		Description and value of any prope	rtu	Data navment	Amount of					
	Address		transferred	ity	Date payment or transfer was	payment					
					made						
18.	Within 2 years before you filed for bankr	untev (did you sall trade or otherwise transf	for any nron	erty to anyone othe	r than property					
	transferred in the ordinary course of you			iei ally prop	erty to arryone, othe	than property					
	Include both outright transfers and transfers			curity interes	t or mortgage on your	property). Do not					
	include gifts and transfers that you have alr	eady list	ted on this statement.								
	No										
	Yes. Fill in the details.										
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made					
	Address		property transferred	payments		made					
	Person's relationship to you			•	J						
10	Within 10 years before you filed for bank	cruptov	did you transfer any property to a co	lf-cattlad to	et or cimilar davica	of which you are a					
13.	beneficiary? (These are often called asset			กรอนแซน เก็น	ist of Sillinal Gevice	or willou you ale a					
	■ No	,	,								
	Yes. Fill in the details.										
	Name of trust		Description and value of the proper	rty transferre	ed	Date Transfer was					
			,	,		made					

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Debtor 1 William Charles Shaffer
Debtor 2 Virginia Lynn Shaffer

Case number (if known)

Par	t 8: List of Certain Financial Accounts, In	nstruments, Safe Depos	sit Boxes, and Sto	orage Units	s				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No								
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, an	ny safe dep	osit box or other deposit	ory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe t	the contents	Do you still have it?			
22.	Have you stored property in a storage unit	or place other than you	ur home within 1	year befor	e you filed for bankruptcy	?			
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		the contents	Do you still have it?				
Par	t 9: Identify Property You Hold or Contro	I for Someone Else							
23.	Do you hold or control any property that so for someone.	omeone else owns? Inc	lude any propert	y you borr	owed from, are storing fo	r, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe t	the property	Value			
Par	t 10: Give Details About Environmental In	formation							
For	the purpose of Part 10, the following definit	ions apply:							
	Environmental law means any federal, state toxic substances, wastes, or material into regulations controlling the cleanup of thes	the air, land, soil, surfa	ce water, ground						
	Site means any location, facility, or propert to own, operate, or utilize it, including disp		environmental la	aw, whethe	er you now own, operate,	or utilize it or used			
	Hazardous material means anything an enhazardous material, pollutant, contaminant		s as a hazardous	waste, haz	zardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings th	nat you know about, reç	gardless of when	they occu	rred.				
24.	Has any governmental unit notified you that	at you may be liable or	potentially liable	under or ir	n violation of an environm	ental law?			
	No No								
	Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it ZIP Code)								

_	otor 2				Cas	se number (if known)						
25.	Hav	e you notified any governmental unit of	any release of h	azardous material?								
		No										
		Yes. Fill in the details.										
		me of site dress (Number, Street, City, State and ZIP Code)	Governme Address (I ZIP Code)	ental unit Number, Street, City, State ar		Environmental law, if you know it	Date of notice					
26.	Hav	e you been a party in any judicial or adı	ministrative proc	eeding under any env	/ironn	nental law? Include settlements	and orders.					
	_											
		No Yes. Fill in the details.										
		se Title se Number	Court or a Name Address (I State and ZIP	Number, Street, City,	Nat	ure of the case	Status of the case					
Par	t 11:	Give Details About Your Business or	Connections to	Any Business								
27.	With	nin 4 years before you filed for bankrup	tcv. did vou own	a business or have a	nv of	the following connections to an	v business?					
		☐ A sole proprietor or self-employed			-	_	, 220					
		☐ A member of a limited liability comp	•		•	•						
		☐ A partner in a partnership	, , , , , , , , , , , , , , , , , , , ,	, , ,		,						
		☐ An officer, director, or managing executive of a corporation										
		☐ An owner of at least 5% of the voting or equity securities of a corporation										
	_	No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.										
	✓ Yes. Check all that apply above and fill in the details below for each business. Business Name Describe the nature of the business Employer Identification number											
	Add	dress mber, Street, City, State and ZIP Code)				Do not include Social Security number or I						
	(ITGI	inder, direct, dity, diate and 211 dodey	Name of accountant or bookkeeper			Dates business existed						
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, did you give	a financial statement	to an	yone about your business? Incl	ude all financial					
		No										
		Yes. Fill in the details below.										
		dress	Date Issued									
		mber, Street, City, State and ZIP Code)										
Par	t 12:	Sign Below										
are with	true a	ad the answers on this <i>Statement of Fin</i> and correct. I understand that making a ankruptcy case can result in fines up to . §§ 152, 1341, 1519, and 3571.	false statement,	concealing property,	or ob	otaining money or property by fr						
/s/	Willi	iam Charles Shaffer		ginia Lynn Shaffer								
		n Charles Shaffer re of Debtor 1		ia Lynn Shaffer ure of Debtor 2								
Dat		November 14, 2018	Date	November 14, 201	18							
Did ■ N □ Y	lo	attach additional pages to Your Stateme	ent of Financial A	Affairs for Individuals	Filing	g for Bankruptcy (Official Form 1	07)?					
Did ■ N		pay or agree to pay someone who is no	t an attorney to I	nelp you fill out bankr	uptcy	forms?						
_		Name of Person Attach the Bankru	uptcy Petition Prep	parer's Notice, Declarat	tion, a	nd Signature (Official Form 119).						
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6												

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Debtor 1 William Charles Shaffer
Debtor 2 Virginia Lynn Shaffer

Case number (if known)

	Case 18-	-12387-v	vhd Doc 1		ed 11/14/1	8 Entered 11/1 Page 15 of 52	4/18 11:5	53:00 E	Desc	Main
Fill in tl	his informatio	n to identify	your case and th			Page 15 of 52				
Debtor	1 W	/illiam Cha	rles Shaffer							
20210.		st Name		e Name		Last Name				
Debtor 2		irginia Lyn								
(Spouse, i	if filing) Fire	st Name	Middle	e Name		Last Name				
United S	States Bankrup	tcy Court for	the: NORTHER	N DIST	RICT OF GEOF	RGIA				
Case nu	umber								_	Check if this is an amended filing
	ial Form		-							
Sch	edule A	√B: Pr	operty						1	2/15
. Do yo		ny legal or eq				and, or similar property?				
1.1				What	is the property?	Check all that apply				
565 Eagles Nest Circle Street address, if available, or other description		Dupley or multi-unit building the amou				not deduct secured claims or exemptions. Put amount of any secured claims on Schedule D: ditors Who Have Claims Secured by Property.		s on Schedule D:		
Ca	arrollton	GA	30117-0000		Manufactured o	or mobile home	Current val			rent value of the ion you own?
City	у	State	ZIP Code		Investment prop	perty	\$14	9,267.00		\$149,267.00
					Timeshare Other		Describe the nature of your ownership inter (such as fee simple, tenancy by the entiretie			
				Who		n the property? Check one	a lite estate	e), if known.		
Ca	arroll				Debtor 1 only Debtor 2 only					
	unty			_	Debtor 1 and De	ehtor 2 only				
	•			_		the debtors and another		if this is com tructions)	munit	y property

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$149,267.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

property identification number:

Other information you wish to add about this item, such as local

Official Form 106A/B Schedule A/B: Property page 1

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Ca				
_	rs, vans, trucks, tractors, sport	utility vehicles, motorcycles		
	Yes			
3.1	Make: Nissan	Who has an interest in the property? Check one	Do not deduct secured cl	laims or exemptions. Put
. '	Model: Sentra	Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year: 2016	■ Debtor 2 only		
	Approximate mileage:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	At least one of the debtors and another	onimo proporty i	portion you out
		Check if this is community property (see instructions)	\$14,000.00	\$14,000.0
3.2	Make: Dodge	Who has an interest in the property? Check one		laims or exemptions. Put ed claims on Schedule D:
	Model: Ram 1500	Debtor 1 only		ims Secured by Property.
	Year: 2002	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$1,000.00	\$1,000.0
		n you own for all of your entries from Part 2, including an 2. Write that number here		\$15,000.00
.pa		2. Write that number here		\$15,000.00
.pa rt 3	ges you have attached for Part Describe Your Personal and Ho	2. Write that number here		Current value of the portion you own?
.pa art & o y	ges you have attached for Part Describe Your Personal and Ho	usehold Items uitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured
.pa	ges you have attached for Part Describe Your Personal and Ho ou own or have any legal or equ usehold goods and furnishings tamples: Major appliances, furnitu	usehold Items uitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured
.pa	ges you have attached for Part Describe Your Personal and Ho Dou own or have any legal or equ usehold goods and furnishings tamples: Major appliances, furnitu No Yes. Describe	usehold Items uitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured
part 3 Part 3 Po y Ho E	ges you have attached for Part Describe Your Personal and Ho ou own or have any legal or equ usehold goods and furnishings tamples: Major appliances, furnitu No Yes. Describe fridge a	usehold Items uitable interest in any of the following items? s ure, linens, china, kitchenware		Current value of th portion you own? Do not deduct secur claims or exemption
.pa art 3 o y Ho E E	ges you have attached for Part Describe Your Personal and Ho Dou own or have any legal or equ usehold goods and furnishings tamples: Major appliances, furnitation No Yes. Describe fridge a Misc Hi cetronics tamples: Televisions and radios; tamples: Televisions and	usehold Items uitable interest in any of the following items? s ure, linens, china, kitchenware		Current value of the portion you own? Do not deduct secure claims or exemptions \$1,000

Official Form 106A/B

Schedule A/B: Property

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Debtor Debtor		wn)
8. Coll e	lectibles of value	
Exa.	amples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, of other collections, memorabilia, collectibles	coin, or baseball card collections;
■ N □ Y	No Yes. Describe	
. .	simment for anorte and habbies	
	uipment for sports and hobbies amples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cano musical instruments	es and kayaks; carpentry tools;
	Yes. Describe	
10. Fire	rearms ixamples: Pistols, rifles, shotguns, ammunition, and related equipment	
■ N □ Y	No Yes. Describe	
11. Clo	othes	
	xamples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
■ Y	Yes. Describe	
	Misc clothing	\$300.00
	xamples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gem	ns, gold, silver \$300.00
Ex	on-farm animals xamples: Dogs, cats, birds, horses	
■ N □ Y	Yes. Describe	
14. An y	ny other personal and household items you did not already list, including any health aids you did not lis	t
■ N □ Y	No Yes. Give specific information	
4- •		
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached or Part 3. Write that number here	\$3,200.00
Part 4:	Describe Your Financial Assets	
	ou own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cas <i>Ex</i> . ■ N	xamples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your p	etition
□ Y	Yes	
	eposits of money examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokera institutions. If you have multiple accounts with the same institution, list each.	ge houses, and other similar
□ N	No	
Y	Yes Institution name:	

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Debtor 2	William Ch Virginia Ly		ıffer		Case number (if know	n)
		17.1.	Checking	Suntrust		\$500.00
			ely traded stocks ent accounts with b	rokerage firms, money mark	et accounts	
☐ Yes.			Institution or issue	r name:		
	ublicly traded /enture	stock and	interests in incorp	porated and unincorporate	d businesses, including an inter	est in an LLC, partnership, and
☐ Yes.	Give specific i		about themne of entity:		% of ownership:	
Negot	iable instrumen	its include p	ersonal checks, ca	otiable and non-negotiable ashiers' checks, promissory r ransfer to someone by signir	notes, and money orders.	
☐ Yes.	Give specific in		about them uer name:			
	ment or pension ples: Interests in			403(b), thrift savings accour	nts, or other pension or profit-sharin	ng plans
	List each acco		ely. of account:	Institution name:		
Your s		sed deposit	s you have made s	so that you may continue ser , public utilities (electric, gas	vice or use from a company , water), telecommunications comp	panies, or others
				Institution name or i	ndividual:	
23. Annuit	ties (A contract	for a period	dic payment of mor	ney to you, either for life or fo	or a number of years)	
☐ Yes.		Issuer nam	e and description.			
	ts in an educa .C. §§ 530(b)(1)			qualified ABLE program, o	r under a qualified state tuition բ	orogram.
☐ Yes.		Institution r	name and description	on. Separately file the record	ls of any interests.11 U.S.C. § 521((c):
■ No	-			other than anything listed	in line 1), and rights or powers e	exercisable for your benefit
☐ Yes.	Give specific i	nformation	about them			
Exam _l ■ No	ples: Internet do	omain nam	es, websites, proce	and other intellectual properties and licens		
	Give specific i					
			r general intangib lusive licenses, cod		s, liquor licenses, professional lice	nses
☐ Yes.	Give specific i	nformation	about them			
Money or	property owed	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

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_			Document	Page 19 of 52	
	ebtor 1 ebtor 2	William Charles Shaffer Virginia Lynn Shaffer		Case number (if known)	
28.	■ No	funds owed to you Give specific information about them, in	cluding whether you alrea	ady filed the returns and the tax years	
29.	Examp ■ No	support oles: Past due or lump sum alimony, spo	ousal support, child suppo	ort, maintenance, divorce settlement, property s	settlement
30.	Exam _p ■ No	benefits; unpaid loans you made to		efits, sick pay, vacation pay, workers' compens	sation, Social Security
31.	Interes	Give specific information sts in insurance policies oles: Health, disability, or life insurance;	health savings account (I	HSA); credit, homeowner's, or renter's insurance	ce
	☐ Yes.	Name the insurance company of each p Company name:	policy and list its value.	Beneficiary:	Surrender or refund value:
32.	If you a some o	terest in property that is due you fron are the beneficiary of a living trust, expe one has died. Give specific information		d surance policy, or are currently entitled to recei	ve property because
33.	Examµ ■ No	against third parties, whether or not oles: Accidents, employment disputes, ir Describe each claim			
34.	■ No	contingent and unliquidated claims of Describe each claim	f every nature, including	g counterclaims of the debtor and rights to	set off claims
35.	■ No	nancial assets you did not already list Give specific information			
36		the dollar value of all of your entries f art 4. Write that number here		ny entries for pages you have attached	\$500.00
Pa	rt 5: De	scribe Any Business-Related Property Yoເ	ı Own or Have an Interest I	n. List any real estate in Part 1.	
-	No. Go	own or have any legal or equitable interest to Part 6. Go to line 38.	in any business-related pr	operty?	
Pa		scribe Any Farm- and Commercial Fishing ou own or have an interest in farmland, list it i		n or Have an Interest In.	
46.	■ No.	own or have any legal or equitable in Go to Part 7. Go to line 47.	nterest in any farm- or c	commercial fishing-related property?	

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Debt Debt			Case number (if known)	
	Do you have other property of any kind you did r Examples: Season tickets, country club membership	•		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from I	Part 7. Write that number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$149,267.00
56.	Part 2: Total vehicles, line 5	\$15,000.00	_	
57.	Part 3: Total personal and household items, line	e 15 \$3,200.00		
58.	Part 4: Total financial assets, line 36	\$500.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property,	line 52 \$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$18,700.00	Copy personal property total	\$18,700.00
63.	Total of all property on Schedule A/B. Add line 5	55 + line 62		\$167,967.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this information to identify your case:								
Debtor 1	William Charles S	Shaffer						
	First Name	Middle Name	Last Name					
Debtor 2	Virginia Lynn Sha	affer						
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA					
Case number (if known)				☐ Check if this is an amended filing				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions a	re you claiming	? Check one only	, even if you	r spouse is filing	g with y	you.
----	---------------------------	-----------------	------------------	---------------	--------------------	----------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
565 Eagles Nest Circle Carrollton, GA 30117 Carroll County	\$149,267.00		\$10,240.83	O.C.G.A. § 44-13-100(a)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2002 Dodge Ram 1500 Line from Schedule A/B: 3.2	\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(3)
Ellie Holli Genedale 74 B. G.E			100% of fair market value, up to any applicable statutory limit	
Misc HHG/furniture Line from Schedule A/B: 6.2	\$1,200.00		\$1,200.00	O.C.G.A. § 44-13-100(a)(4)
Ellie Holli Genedale 74 B. G.E			100% of fair market value, up to any applicable statutory limit	
Misc eletronics Line from Schedule A/B: 7.1	\$400.00		\$400.00	O.C.G.A. § 44-13-100(a)(4)
Ellio II olii ooriodalo 742. TTT			100% of fair market value, up to any applicable statutory limit	
Misc clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	O.C.G.A. § 44-13-100(a)(4)
Line from Gonedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit	

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Debtor	Virginia Lynn Shaffer			Case number (if known)		
	rief description of the property and line on chedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	isc jewelry ne from Schedule A/B: 12.1	\$300.00		\$300.00	O.C.G.A. § 44-13-100(a)(5)	
LII	TIE HOTH SCHEUUIG PAB. 12.1		☐ 100% of fair market value, up to any applicable statutory limit			
	hecking: Suntrust	\$500.00	\$500.00		O.C.G.A. § 44-13-100(a)(6)	
LII	ne nom <i>Scriedule A/B.</i> 17.1			100% of fair market value, up to any applicable statutory limit		
	re you claiming a homestead exemption subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ases fi	•	,	

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	Document	Page 23	of 52		
Fill in this information to identify y	our case:				
Debtor 1 William Charl	os Shaffor				
First Name	Middle Name	Last Name		-	
Debtor 2 Virginia Lynn	Shaffer				
(Spouse if, filing) First Name	Middle Name	Last Name		-	
United States Bankruptcy Court for the	ne: NORTHERN DISTRICT OF G	EORGIA			
Officed States Barkruptcy Court for the	ie. Noktriekti biotikiet of o	LONGIA		-	
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
000					
Official Form 106D					
Schedule D: Creditor	rs Who Have Claims	Secured	by Propert	У	12/15
			<u> </u>	<u> </u>	
Be as complete and accurate as possible is needed, copy the Additional Page, fill					
number (if known).	,		,	pg, ,	
1. Do any creditors have claims secured	by your property?				
☐ No. Check this box and subm	it this form to the court with your othe	er schedules. You	u have nothing else t	o report on this form.	
Yes. Fill in all of the information	on below		ŭ	•	
	on below.				
Part 1: List All Secured Claims			Column A	Column B	Column C
2. List all secured claims. If a creditor ha					
for each claim. If more than one creditor I much as possible, list the claims in alphab			Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
			value of collateral.	claim	if any
2.1 Badcock	Describe the property that secures	the claim:	\$1,493.00	\$1,000.00	\$493.00
Creditor's Name	fridge and mower				
P.O.Box 1034	As of the date you file, the claim is	: Check all that			
Mulberry, FL 33860	apply. Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as	s mortgage or secu	ired		
Debtor 2 only	car loan)				
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and anothe	r U Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	PMSI			
community debt	outer (morauming a right to emoct)				
Date debt was incurred	Last 4 digits of account nun	nber			
Citizens One Auto					
Finance	Describe the property that secures	the claim:	\$20,246.81	\$14,000.00	\$6,246.81
Creditor's Name	2016 Nissan Sentra				
Consumer Loan					
Servicing	As of the date you file, the claim is	Chock all that			
Po Box 42002	apply.	- Check all that			
Providence, RI 02940	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	Disputed				
_	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as car loan)	s moπgage or secu	ired		
_	☐ Statutory lien (such as tax lien, me	echanic's lies			
Debtor 1 and Debtor 2 only	<u> </u>	echanics lien)			
At least one of the debtors and anothe	_ ~	title lien			
☐ Check if this claim relates to a	Other (including a right to offset)	une nen			

Official Form 106D

community debt

Date debt was incurred

Last 4 digits of account number

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Debtor 1	William Charles S	haffer			Case number (if	known)		
	First Name	Middle Name	Last Name	_				
Debtor 2	Virginia Lynn Sha	ffer						
	First Name	Middle Name	Last Name					
	an Depot	Describe	the property that secures	the claim:	\$139,026	5.17	\$149,267.00	\$0.00
Cred	litor's Name	565 Eag	les Nest Circle Car	rollton,				
		GA 301	17 Carroll County					
ВС	D.Box 77404	As of the	date you file, the claim is	: Check all that	J			
	ing, NJ 08628	apply.						
		Conting						
Num	ber, Street, City, State & Zip Co							
Who owe	s the debt? Check one.	☐ Dispute						
_			lien. Check all that apply.					
☐ Debtor	•	0	eement you made (such as	mortgage or	secured			
☐ Debtor	2 only	car loa	•					
Debtor	1 and Debtor 2 only	☐ Statuto	ry lien (such as tax lien, m	echanic's lien))			
☐ At leas	t one of the debtors and a	nother	ent lien from a lawsuit					
	if this claim relates to a nunity debt	Other (including a right to offset)	First Mo	rtgage			
Date debt	was incurred	Las	st 4 digits of account num	nber				
Add tho	dollar value of your entr	ios in Column A on	this page. Write that nur	nhar hara:	Q 4	60,765.98	1	
	•		this page, write that hur alue totals from all pages				-	
	at number here:	in, add the dollar v	and totals from all pages	,	\$1	60,765.98		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 25	of 52		
Fill in this infor	mation to identify your case:					
Debtor 1	William Charles Shaffer					
		dle Name	Last Name			
Debtor 2	Virginia Lynn Shaffer					
(Spouse if, filing)	First Name Midd	dle Name	Last Name			
United States Ba	ankruptcy Court for the: NORTHI	ERN DISTRICT OF GE	ORGIA			
Case number						
(if known)					_ c	heck if this is an
					ar	mended filing
Official Forr	n 106E/E					
	<u>⊓ 100⊑/1</u> E/F: Creditors Who Ha	ve Unsecured	Claime			12/15
	d accurate as possible. Use Part 1 for			Dort 2 for exaditors with N	ONDDIODITY alsi:	
Schedule D: Credit left. Attach the Cor name and case nu	• •	operty. If more space is n ave no information to rep	eeded, copy t	he Part you need, fill it o	ut, number the ent	ries in the boxes on the
	II of Your PRIORITY Unsecured (
	ors have priority unsecured claims ag	gainst you?				
No. Go to F	Part 2.					
☐ Yes.						
Part 2: List A	III of Your NONPRIORITY Unsecu	ired Claims				
3. Do any credit	ors have nonpriority unsecured claim	s against you?				
☐ No. You ha	ive nothing to report in this part. Submit	this form to the court with y	our other sche	dules.		
Yes.						
unsecured clai	r nonpriority unsecured claims in the m, list the creditor separately for each cl tor holds a particular claim, list the other	laim. For each claim listed,	identify what ty	ype of claim it is. Do not list	t claims already incl	luded in Part 1. If more
						Total claim
4.1 Amazo	n	Last 4 digits of acco	unt number	0473		\$1,180.37
•	y Creditor's Name	─ When was the debt i	:			
	x 965060 o, FL 32896-5060	when was the debt	incurrea?			
	Street City State Zlp Code	As of the date you fi	le, the claim is	s: Check all that apply		
Who incu	rred the debt? Check one.					
☐ Debto	r 1 only	☐ Contingent				
■ Debto	r 2 only	☐ Unliquidated				
☐ Debto	r 1 and Debtor 2 only	☐ Disputed				
☐ At leas	st one of the debtors and another	Type of NONPRIORI	TY unsecured	claim:		
☐ Check	cif this claim is for a community	☐ Student loans				
debt	im subject to offset?			ration agreement or divorce	e that you did not	
Is the cia ■ No	ini subject to onset?	report as priority clain		g plans, and other similar d	lehts	
		•		j pians, and other similar o	enia	
☐ Yes		Other. Specify	realt card			

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Debto	2 Virginia Lynn Shaffer	Case number (if known)	
4.2	Atlanta Liver & Pancreatic Nonpriority Creditor's Name	Last 4 digits of account number	\$651.44
	c/o PAB P.O.Box 279 Norcross, GA 30091-0279	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.3	Carrollton Emergency Phys P.C. Nonpriority Creditor's Name	Last 4 digits of account number	\$200.00
	PO Box 95938	When was the debt incurred?	
	Oklahoma City, OK 73143-5938 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Поло	
	Debtor 2 only	☐ Contingent	
	<u> </u>	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other Specify medical	
		Other: Specify	
4.4	Comenity Capital/Gamestop Nonpriority Creditor's Name	Last 4 digits of account number 5001	\$259.11
	PO Box 183043 Columbus, OH 43218-3043	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	

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Debtor 2 Virginia Lynn Shaffer		Case number (if known)	
4.5	Fingerhut Advantage	Last 4 digits of account number	\$832.42
	Nonpriority Creditor's Name PO Box 166	When was the debt incurred?	
	Newark, NJ 07101-0166	Then was the dest mounted.	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	
4.6	Lowes	Last 4 digits of account number 4709	\$1,675.15
	Nonpriority Creditor's Name PO Box 965060	When was the debt incurred?	
	Orlando, FL 32896-5060 Number Street City State Zlp Code	As of the date year file, the plains in Observation with at such	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<u></u>	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	
4.7	Northside Hospital	Last 4 digits of account number	\$172,840.99
	Nonpriority Creditor's Name 1100 Johnson Ferry Rd,	When was the debt incurred?	
	Suite 780		
	Atlanta, GA 30342-1611 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the claim is: officer all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify medical	

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Debto	vr 2 Virginia Lynn Shaffer	Case number (if known)	
4.8	Paypal/ Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$2,392.18
	Attn: Bankruptcy Dept. Po Box 965060	When was the debt incurred?	
	Orlando, FL 32896-5060 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	
4.9	Suntrust	Last 4 digits of account number 6031	\$1,964.31
	Nonpriority Creditor's Name P.o.Box 621569	When was the debt incurred?	
	Orlando, FL 32862-1569 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	······································	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify credit card	
4.1	Tanner Health System	Last 4 digits of account number	\$50.00
0	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ00.00
	1643 Lewis Ave, Ste 203 Billings, MT 59102-4151	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

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		Charles Shaffer Lynn Shaffer	Document Page 2		umber (if kr	nown)			
4.1	Walmart		Last 4 digits of account number	6510)		\$3,861.56		
<u>. </u>			When was the debt incurred?	in Ob	l II 4b - 4				
		the debt? Check one.	As of the date you file, the claim	is: Chec	k ali that ap	piy			
	Debtor 1 on		☐ Contingent						
	■ Debtor 2 on	lv	☐ Unliquidated						
		d Debtor 2 only	☐ Disputed						
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
		is claim is for a community	☐ Student loans						
	debt	bject to offset?	Obligations arising out of a sep	aration a	greement or	divorce that you did not			
	■ No	•	Debts to pension or profit-shari	ng plans,	and other s	imilar debts			
	Yes		Other. Specify credit card	l					
4.1	Wells Fargo	0	Last 4 digits of account number	1768	3		\$256.32		
	PO.Box 103		When was the debt incurred?						
	Number Street	City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Chec	k all that app	ply			
	Debtor 1 on	ly	☐ Contingent						
	Debtor 2 on	ly	☐ Unliquidated						
	Debtor 1 and	d Debtor 2 only	☐ Disputed						
	☐ At least one	of the debtors and another		Type of NONPRIORITY unsecured claim:					
		is claim is for a community	☐ Student loans						
	debt	bject to offset?	☐ Obligations arising out of a sep report as priority claims						
	■ No	ibject to offset.	Debts to pension or profit-shari	na plans.	and other s	imilar debts			
	□ Yes		Other. Specify crecit card						
Part 3:		s to Be Notified About a Debt							
is tryii have r notifie	ng to collect fromore than one ced for any debts	om you for a debt you owe to son creditor for any of the debts that is in Parts 1 or 2, do not fill out or mounts for Each Type of Uns	secured Claim	n Parts 1 litional c	or 2, then reditors he	list the collection agency re. If you do not have add	r here. Similarly, if you ditional persons to be		
	of unsecured cla		ns. This information is for statistical	reporting	j purposes	Total Claim	the amounts for each		
	6a. Fotal	Domestic support obligations		6a.	\$	0.00			
from P	aims art 1 6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00			
	6c.	Claims for death or personal in	jury while you were intoxicated	6c.	\$	0.00	-		
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00	-		
	6e.	Total Priority. Add lines 6a throu	ıgh 6d.	6e.	\$	0.00	_		
						Total Claim			
	6f.	Student loans		6f.	\$	0.00			

Official Form 106 E/F

Total claims

from Part 2

0.00

Debtor 1 William Charles Shaffer Virginia Lynn Shaffer

Case number (if known)

- 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. \$
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total Nonpriority. Add lines 6f through 6i.

0.00	\$ 6h.
186,163.85	\$ 6i.

6j. **186,163.85**

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Fill in this inform	mation to identify your		a.g	
Debtor 1	William Charles S	Shaffer		
	First Name	Middle Name	Last Name	
Debtor 2	Virginia Lynn Sha	affer		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number _				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5	City		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Docum	ent Page 32 d	of 52	
Fill in thi	s information to identify	your case:			
Debtor 1	William Char	des Cheffer			
Debioi	First Name	Middle Name	Last Name		
Debtor 2	Virginia Lynr	n Shaffer			
(Spouse if, fi		Middle Name	Last Name		
United St	ates Bankruptcy Court for	the: NORTHERN DISTRIC	T OF GEORGIA		
0					
Case nun	nber				Check if this is an
,				"	amended filing
					aoaoag
Officia	al Form 106H				
) - - - -			
Sche	dule H: Your C	odeptors			12/15
people are	e filing together, both are and number the entries i	e equally responsible for sup n the boxes on the left. Attac	plying correct informath the Additional Page (is complete and accurate as pos ion. If more space is needed, co to this page. On the top of any A	opy the Additional Page,
your nam	e and case number (if kn	own). Answer every question	n.		
1. Do	you have any codebtors	s? (If you are filing a joint case,	do not list either spouse	as a codebtor.	
■ NI-					
■ No					
ЦYe	es .				
				ry? (Community property states ar	nd territories include
Arizo	na, California, Idano, Louis	siana, Nevada, New Mexico, P	ueπo κιco, Texas, vvasn	ington, and wisconsin.)	
■ No	o. Go to line 3.				
`		r spouse, or legal equivalent liv	ve with you at the time?		
	, , , , , , , , , , , , , , , , , , , ,	-	, , , , , , , , , , , , ,		
0 1- 0-	4 Pet all at	debiene Benedikaskada aras			
				if your spouse is filing with you sure you have listed the credito	
				06G). Use Schedule D, Schedule	
out C	Column 2.	,	•	•	
	Column 1: Your codebto	r		Column 2: The creditor to w	whom you owe the debt
	Name, Number, Street, City, State			Check all schedules that app	
				_	
3.1	Nome			Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
0.2	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	-				
	Number Street City	State	ZIP Code		
	•				

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Fill	in this information to ider	ntify your ca	ase:								
De	btor 1 Wil	liam Cha	rles Shaffer			_					
1 -	btor 2 Virgouse, if filing)	ginia Lyn	n Shaffer								
Un	ited States Bankruptcy Co	ourt for the	NORTHERN DISTRIC	T OF GEORGIA		_					
	se number						Check	if this is:			
(If k	nown)						l —	amende	Ū		
										postpetition llowing date:	
0	fficial Form 10	6I					NAN	// DD/ Y		Ü	
	chedule I: You		ome				IVIIV	// / / / / / / / / / / / / / / / / / / /			12/1
sup spo atta	as complete and accura plying correct informationse. If you are separate ach a separate sheet to the separate Describe Em	ion. If you ed and you this form. (are married and not filir r spouse is not filing wi	ng jointly, and your s th you, do not inclu	spouse i de infori	s liv nati	ing with y on about y	ou, inclu our spo	ide inform use. If mo	ation about re space is	your needed,
1.	Fill in your employme	-									
	information.			Debtor 1			ı	Debtor 2	or non-fil	ing spouse	
	If you have more than one job, attach a separate page with		Employment status	☐ Employed			I	☐ Employed			
	information about addit		, .,	■ Not employed			I	■ Not employed			
	employers.		Occupation								
	Include part-time, seas self-employed work.	onal, or	Employer's name								
	Occupation may includ or homemaker, if it app		Employer's address								
			How long employed th	nere?				_			
Pa	rt 2: Give Details	About Mon	thly Income								
	imate monthly income a use unless you are separ		ate you file this form. If y	ou have nothing to re	eport for	any	line, write \$	\$0 in the	space. Inc	lude your noi	n-filing
	ou or your non-filing spous re space, attach a separa			mbine the information	n for all e	empl	oyers for th	nat perso	n on the lir	nes below. If	you need
							For Debt	or 1	For Deb	otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthly		2.	\$		0.00	\$	0.00	
3.	Estimate and list mon	nthly overti	me pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Incor	ne. Add lin	e 2 + line 3.		4.	\$	C	0.00	\$	0.00	

0.00

0.00

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	tor 1 tor 2	William Charles Shaffer Virginia Lynn Shaffer		(Case	number (if kn	own)				
					For Debtor 1				Debtor -filing s		
	Cop	by line 4 here	4.		\$	0	.00	\$		0.00	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	0	.00	\$		0.00)
	5b.	Mandatory contributions for retirement plans	5b		\$.00	\$_		0.00	
	5c.	Voluntary contributions for retirement plans	50		<u> </u>		.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d		\$.00	\$		0.00	
	5e.	Insurance	5e) .	\$.00	\$		0.00	
	5f.	Domestic support obligations	5f.		\$.00	\$		0.00	
	5g.	Union dues	5 g	J.	\$	0	.00	\$		0.00	<u> </u>
	5h.	Other deductions. Specify:	5h	1.+	\$	0	.00	+ \$		0.00)
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0	.00	\$		0.00)
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0	.00	\$		0.00	<u>)</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$	n	.00	\$		0.00	1
	8b.	Interest and dividends	8b		\$.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	nt 8c	; .	\$	0	.00	\$		0.00	_
	8d.	Unemployment compensation	8d	i.	\$	0	.00	\$		0.00)
	8e.	Social Security	8e	€.	\$	1,637	.00	\$		0.00)
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	ce 8f. 8g		\$_ \$	0 1,067	.00	\$ \$		0.00	_
	8h.	Other monthly income. Specify:	_		\$.00	+ \$		0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	2,704	.09	\$_		0.0	00
10	Cal	aulata manthly income. Add line 7 , line 0	40	ф.		2 704 00	. [0.00		2 704 00
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,704.09	+ 5		0.00	= \$_	2,704.09
11.	Incl othe Do	te all other regular contributions to the expenses that you list in <i>Schedu</i> ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are noticify:	ur depe			•		•	Schedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The refer that amount on the Summary of Schedules and Statistical Summary of Certilies							12.	\$	2,704.09
13.		you expect an increase or decrease within the year after you file this for	m?							Comb	ined ily income
		No.									

Fill in this information	-4: t- :- 4:6												
Fill in this informa	ation to identify yo	our case:											
Debtor 1	William Charles Shaffer				Check if this is: An amended filing								
Debtor 2 (Spouse, if filing)	Virginia Lyni	nia Lynn Shaffer					☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date:						
United States Bank	ruptcy Court for the	: NORTH	IERN DISTRICT OF GEOR	RGIA		М	M / DD / YYYY						
Case number(If known)													
Official Fo	orm 106J												
Schedule	J: Your l	Expen	ises					12/1					
	nore space is ne	eded, atta	If two married people ar ch another sheet to this n.										
	ribe Your House	hold											
1. Is this a joi													
☐ No. Go to	es Debtor 2 live i	in a senar:	ate household?										
	lo		al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of D	ebtoi	· 2.						
	e dependents?	□ No	, ,	•									
Do not list Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?					
Do not state dependents				daughter		_ _ _	19-disable d	□ No ■ Yes □ No □ Yes □ No □ Yes □ No					
expenses of yourself an	penses include of people other the d your dependent	han nts? □	No Yes					☐ Yes					
Estimate your e	xpenses as of you	our bankrı	uptcy filing date unless y y is filed. If this is a supp										
	h assistance an		government assistance i luded it on <i>Schedule I:</i>)				Your expe	enses					
	The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.				e 4.	\$		775.00					
If not inclu	ded in line 4:												
4a. Real	estate taxes				4a.	\$		0.00					
	estate taxes erty, homeowner's	s, or renter	's insurance		4b.			0.00					
			ipkeep expenses		4c.			0.00					
	eowner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5.	\$ \$		0.00 0.00					
		y c		oquity lourio	٥.	Ψ.		<u> </u>					

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		William Charles Shaffer Virginia Lynn Shaffer					Case number (if known)					
6.	Utilities:											
	6a. Elec	ctricity, h	eat, natural gas			6a.	\$	280.00				
	6b. Wat	iter, sew	er, garbage collection	on		6b.	\$	30.00				
	6c. Tele	ephone,	cell phone, Interne	t, satellite, and cable services	3	6c.	\$	250.00				
	6d. Oth	ner. Spec	ify: Cell Phone			6d.	\$	200.00				
7.			ceeping supplies			7.	·	500.00				
8.			ildren's education			8.	·	0.00				
9.	-		, and dry cleaning			9.		100.00				
10.		_	oducts and servic	es		10.		100.00				
11.			al expenses			11.	\$	100.00				
12.	•		nclude gas, mainte payments.	nance, bus or train fare.		12.	\$	100.00				
13				ewspapers, magazines, an	d books	13.	· <u> </u>	0.00				
			butions and religi		a books	14.		0.00				
	Insurance		g.					0.00				
			urance deducted fr	om your pay or included in lir	nes 4 or 20.							
	15a. Life	e insuran	ce			15a.	\$	80.00				
	15b. Hea	alth insu	ance			15b.	\$	0.00				
	15c. Veh	hicle insu	ırance			15c.	\$	188.00				
	15d. Oth	ner insura	ance. Specify:			15d.	\$	0.00				
	Specify:			d from your pay or included i	n lines 4 or 20.	16.	\$	0.00				
17.			ise payments:			4-	•					
			nts for Vehicle 1			17a.		0.00				
			nts for Vehicle 2			17b.		0.00				
	17c. Oth					17c.		0.00				
4.0	17d. Oth	•	·			17d.	\$	0.00				
	deducted from your pay on line 3, 3chedule 1, Your income (Official Form 1001).							0.00				
19.		yments	you make to supp	ort others who do not live	with you.	19.	\$	0.00				
20	Specify:	al nrone	ty expenses not i	ncluded in lines 4 or 5 of th	is form or on Scho		our Income					
20.			on other property	included in filles 4 of 3 of th	iis ioiiii oi oii sc <i>h</i> e	20a.		0.00				
	20b. Rea					20b.	· -	0.00				
			meowner's, or rent	er's insurance		20c.	· ·	0.00				
			e, repair, and upke			20d.		0.00				
			r's association or co	• •		20e.	· -	0.00				
21.							+\$	0.00				
	о Ор							0.00				
22.		•	onthly expenses									
			rough 21.				\$	2,703.00				
	22b. Copy	y line 22	(monthly expenses	for Debtor 2), if any, from Of	ficial Form 106J-2		\$					
	22c. Add I	line 22a	and 22b. The resu	It is your monthly expenses.			\$	2,703.00				
23.	Calculate	your m	onthly net income).								
	23a. Cop	py line 1	2 (your combined n	nonthly income) from Schedu	le I.	23a.	\$	2,704.09				
	23b. Cop	py your r	nonthly expenses f	rom line 22c above.		23b.	-\$	2,703.00				
	23c. Sub	. Subtract your monthly expenses from your monthly income.										
			s your <i>monthly net</i> i		23c.	\$	1.09					
24.	Do you ex	xpect ar	increase or decre	ease in your expenses with	in the year after yo	u file this	s form?					
	For example	le, do you		g for your car loan within the yea				ase or decrease because of a				
	No.											
	☐ Yes.		Explain here:									

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Fill in this inform	nation to identify your case:								
Debtor 1	William Charles Shaffer								
	First Name Middle Name	Last Name							
Debtor 2 (Spouse if, filing)	Virginia Lynn Shaffer First Name Middle Name	Last Name							
United States Bar	United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA								
Case number									
(if known)	_		☐ Check if this is an amended filing						
Official Fou	rm 100								
Official For Statemen		viduals Filing Under Chapto	er 7 12/15						
		<u> </u>	12.13						
	vidual filing under chapter 7, you must fi	Il out this form if:							
_	ed personal property and the lease has i	not expired.							
You must file this	s form with the court within 30 days after ver is earlier, unless the court extends the	r you file your bankruptcy petition or by the date s ne time for cause. You must also send copies to th							
	ople are filing together in a joint case, bo d date the form.	oth are equally responsible for supplying correct i	nformation. Both debtors must						
•	nd accurate as possible. If more space i our name and case number (if known).	s needed, attach a separate sheet to this form. On	the top of any additional pages,						
Part 1: List Yo	ur Creditors Who Have Secured Claims								
		D: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the						
	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?						
Creditor's Ba	adcock	☐ Surrender the property.	□ No						
name.		Retain the property and redeem it.Retain the property and enter into a	■ Yes						
Description of	fridge and mower	Reaffirmation Agreement.							
property securing debt:		☐ Retain the property and [explain]:							
Creditor's Ci	tizens One Auto Finance	☐ Surrender the property.	□No						
name:		Retain the property and redeem it.							
Description of	2016 Nissan Sentra	Retain the property and enter into a	Yes						
•	2010 NISSAII Selitia	Reaffirmation Agreement.							
property securing debt:		☐ Retain the property and [explain]:							
Creditor's Lo	pan Depot	■ Surrender the property.	□ No						
name:	•	Retain the property and redeem it.							
Description of	565 Eagles Nest Circle Carrollton, GA 30117 Carroll	Retain the property and enter into a Reaffirmation Agreement.	■ Yes						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2 Virginia Lynn Shaffer	Case number (if known)	
property County securing debt:	☐ Retain the property and [explain]:	
in the information below. Do not list real estate lease	eases listed in Schedule G: Executory Contracts and Unexpired Lea es. Unexpired leases are leases that are still in effect; the leas ase if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	ses (Official Form 106G), fill e period has not yet ended.
Describe your unexpired personal property leases	Will	the lease be assumed?
Lessor's name: Description of leased Property:		
Lessor's name: Description of leased Property:		
Lessor's name: Description of leased Property:		
Lessor's name: Description of leased Property:		
Lessor's name: Description of leased Property:		
Lessor's name: Description of leased Property:		
Lessor's name: Description of leased Property:		
Part 3: Sign Below Under penalty of perjury, I declare that I have indicate property that is subject to an unexpired lease. X /s/ William Charles Shaffer William Charles Shaffer	ted my intention about any property of my estate that secures X /s/ Virginia Lynn Shaffer Virginia Lynn Shaffer	
Signature of Debtor 1 Date November 14, 2018	Signature of Debtor 2 Date November 14, 2018	

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Fill in this inforr	nation to identify your	case:		
Debtor 1	William Charles S	Shaffer		
	First Name	Middle Name	Last Name	
Debtor 2	Virginia Lynn Sha	affer		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number _				☐ Chec

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	149,267.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	18,700.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	167,967.00
Pai	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	160,765.98
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	186,163.8
	Your total liabilities	\$	346,929.83
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,704.09
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,703.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	William Charles Shaffer	Document	Page 40 01 52	
Debtor 2	Virginia Lynn Shaffer		Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form		4 000 40
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$_	1,288.46

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this	s information to identify your	ase:	
Debtor 1	William Charles S	hatter Middle Name Last Name	
Debtor 2	Virginia Lynn Sha		
(Spouse if, fili		Middle Name Last Name	—
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF GEORGIA	
Case num	her		
(if known)			Check if this is an amended filing
You must to	file this form whenever you fi	both are equally responsible for supplying correct informati e bankruptcy schedules or amended schedules. Making a fal- connection with a bankruptcy case can result in fines up to 519, and 3571.	se statement, concealing property, or
	Sign Below		
Did y	ou pay or agree to pay some	one who is NOT an attorney to help you fill out bankruptcy fo	rms?
	No		
	Yes. Name of person		ach Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119)
		Dec	saration, and Signature (Official Form 119)
	r penalty of perjury, I declare hey are true and correct.	hat I have read the summary and schedules filed with this de	eclaration and
X /s	s/ William Charles Shaffer	X /s/ Virginia Lynn Shaff	er
	Villiam Charles Shaffer	Virginia Lynn Shaffer	<u>. </u>
S	signature of Debtor 1	Signature of Debtor 2	
5	Pate November 14, 2018	Date November 14, 20	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia

In	William Charles Shaffer 1 re Virginia Lynn Shaffer		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy.	or agreed to be paid	to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	1,000.00	
	Prior to the filing of this statement I have receive	d	\$	1,000.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed cor	npensation with any other person	unless they are mem	bers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the results.				w firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	ts of the bankruptcy	ease, including:	
	 a. Analysis of the debtor's financial situation, and ren b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on h 	tatement of affairs and plan which litors and confirmation hearing, and preduce to market value; exitions as needed; preparation	n may be required; and any adjourned hea emption planning	rings thereof;	ling of
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any control of the debtors in any control of the debtors in any control of the debtors.			ding.	
		CERTIFICATION			
thi	I certify that the foregoing is a complete statement of a is bankruptcy proceeding.	any agreement or arrangement for	payment to me for r	epresentation of the de	btor(s) in
	November 14, 2018	/s/ John T. Dufou	ır		
	Date	John T. Dufour Signature of Attorne Van Pelt & Dufou 527 Newnan Stre Carrollton, GA 30 770-832-0295 Fa jdufour@goodatt Name of law firm	r Law Firm et 0117 Ix: 770-836-8919		

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United States Bankruptcy Court Northern District of Georgia

In re	William Charles Shaffer Virginia Lynn Shaffer		Case No.	
		Debtor(s)	Chapter	7
The ab		IFICATION OF CREDITOR IN that the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true attached list of creditors in the attached list of creditors is attached list of creditors in the attached list of creditors is attached list of creditors in the attached list of creditors is attached list of creditors.		of their knowledge.
Date:	November 14, 2018	/s/ William Charles Shaffer William Charles Shaffer Signature of Debtor		
Date:	November 14, 2018	/s/ Virginia Lynn Shaffer Virginia Lynn Shaffer		

Signature of Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

С	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill in	this information to identify your case:					only as c	lirected in	this form and in	n Form
Debt	or 1 William Charles Shaffer			122	2A-1Supp:				
	Debtor 2 (Spouse, if filing) Virginia Lynn Shaffer ■ 1. There is no presumptio				umption c	of abuse			
Unite	ed States Bankruptcy Court for the: Northern District of	of Georgi	ia		applies	will be r		ne if a presumper <i>Chapter 7 M</i>	
	number			.	_	,		,	
(if kno	vn)							apply now becout it could app	
					☐ Check if	this is a	ın amend	led filing	
Off	icial Form 122A - 1								
Ch	apter 7 Statement of Your Cu	rrent	Moi	nthly Inc	ome				12/1
attach case r qualify Part	complete and accurate as possible. If two married people a separate sheet to this form. Include the line number to womber (if known). If you believe that you are exempted fro ying military service, complete and file Statement of Exempter Calculate Your Current Monthly Income What is your marital and filing status? Check one of Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill o	which the om a pres ption from	addition umption <i>n Presui</i>	nal information a of abuse becaus nption of Abuse	pplies. On the se you do not Under § 707(k	top of a	ny addition marily con	nal pages, write sumer debts or l	your name and because of
	☐ Married and your spouse is NOT filing with you.	You and	d vour s	spouse are:					
	☐ Living in the same household and are not lega		-	-	umns A and	B lines	2-11		
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	out Colu legally se	ımn A, li eparated	nes 2-11; do no d under nonban	t fill out Colu kruptcy law t	mn B. By hat appli	checking		
10 the	I in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the total ouses own the same rental property, put the income from that property.	month peri	od would in the re	l be March 1 throusult. Do not includ	igh August 31. le any income	If the amount m	ount of your	r monthly income nce. For example	varied during , if both
					Column A Debtor 1		Column Debtor non-fili		
2.	Your gross wages, salary, tips, bonuses, overtime,	and cor	nmissi	ons (before all	\$	0.00	\$	0.00	
payron deductions).				0.00	Φ	0.00			
J.	 Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 0.00 \$ 				\$	0.00			
	All amounts from any source which are regularly pof you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	t. Include d, your d	regulai epende	r contributions nts, parents,	\$	0.00	\$	0.00	
5.	Net income from operating a business, profession,	, or farm							
		•		otor 1					
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	-\$	0.00	Copy here ->	e	0.00	\$	0.00	
	Net monthly income from a business, profession, or far	m \$	0.00	Copy nere ->	Ψ	0.00	Ψ	0.00	
6.	Net income from rental and other real property		Deh	otor 1					
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	-\$	0.00						
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00	

Official Form 122A-1

0.00

7. Interest, dividends, and royalties

0.00

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William Charles Shaffer Debtor 1 Virginia Lynn Shaffer Debtor 2 Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse Pension or retirement income. Do not include any amount received that was a 0.00 1,288.46 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,288.46 + \$ 0.00 1,288.46 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,288.46 Multiply by 12 (the number of months in a year) **x** 12 15,461.52 12b. The result is your annual income for this part of the form 12h. 13. Calculate the median family income that applies to you. Follow these steps: GA Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 70,863.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sian Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ William Charles Shaffer X /s/ Virginia Lynn Shaffer William Charles Shaffer Virginia Lynn Shaffer Signature of Debtor 1 Signature of Debtor 2 Date November 14, 2018 Date November 14, 2018 MM / DD / YYYY MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Debtor 1 Debtor 2 William Charles Shaffer
Virginia Lynn Shaffer
Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **05/01/2018** to **10/31/2018**.

Line 9 - Pension and retirement income

Source of Income: **cOX** Income by Month:

6 Months Ago:	05/2018	\$1,288.46
5 Months Ago:	06/2018	\$1,288.46
4 Months Ago:	07/2018	\$1,288.46
3 Months Ago:	08/2018	\$1,288.46
2 Months Ago:	09/2018	\$1,288.46
Last Month:	10/2018	\$1,288.46
	Average per month:	\$1,288.46

Non-CMI - Social Security Act Income

Source of Income: Soc Sec

_	_		_
Income	1	N /	1

6 Months Ago:	05/2018	\$1,637.00
5 Months Ago:	06/2018	\$1,637.00
4 Months Ago:	07/2018	\$1,637.00
3 Months Ago:	08/2018	\$1,637.00
2 Months Ago:	09/2018	\$1,637.00
Last Month:	10/2018	\$1,637.00
	Average per month:	\$1,637.00
	<u> </u>	

Amazon P.O.Box 965060 Orlando, FL 32896-5060

Atlanta Liver & Pancreatic c/o PAB P.O.Box 279 Norcross, GA 30091-0279

Badcock P.O.Box 1034 Mulberry, FL 33860

Carrollton Emergency Phys P.C. PO Box 95938 Oklahoma City, OK 73143-5938

Citizens One Auto Finance Consumer Loan Servicing Po Box 42002 Providence, RI 02940

Comenity Capital/Gamestop PO Box 183043 Columbus, OH 43218-3043

Fingerhut Advantage PO Box 166 Newark, NJ 07101-0166

Loan Depot P.O.Box 77404 Ewing, NJ 08628

Lowes
PO Box 965060
Orlando, FL 32896-5060

Northside Hospital 1100 Johnson Ferry Rd, Suite 780 Atlanta, GA 30342-1611

Paypal/ Synchrony Bank Attn: Bankruptcy Dept. Po Box 965060 Orlando, FL 32896-5060

Suntrust P.o.Box 621569 Orlando, FL 32862-1569

Tanner Health System 1643 Lewis Ave, Ste 203 Billings, MT 59102-4151

Walmart P.O.Box 965064 Orlando, FL 32896-5064

Wells Fargo PO.Box 10347 Des Moines, IA 50306-0347